

Case 08-13403-elf Claim 7-1 Filed 08/02/10 Desc Main Document Page 1 of 1

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF PA		PROOF OF CLAIM
Name of Debtor: JAMES CONWAY	Case Number: 08-13403-ELF	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property) Discover Financial Services c/o AMO Recoveries	Check this box to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent: Discover Financial Services c/o AMO Recoveries PO Box 926100, Norcross, GA 30010-6200	Court Claim Number: _____ (if known)	
Telephone number	Filed on: _____	
Name and address where payment should be sent (if different from above).	<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Telephone number:	<input checked="" type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
1. Amount of Claim as of Date Case Filed: \$ 6,035.78	5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.	
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	Specify the priority of the claim.	
If all or part of your claim is entitled to priority, complete item 5	<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B)	
<input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges	<input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507(a)(1)	
2. Basis for Claim: <u>Schedule F</u> (See instruction #2 on reverse side.)	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507(a)(5)	
3. Last four digits of any number by which creditor identifies debtor: _____	<input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507(a)(7)	
3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)	<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507(a)(8)	
4. Secured Claim (See instruction #4 on reverse side.)	7. Other - Specify applicable paragraph of 11 U.S.C. §507(a)(____)	
Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.	Amount entitled to priority: \$ _____	
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other	*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
Describe:		
Value of Property: \$ _____ Annual Interest Rate: %		
Amount of arrearage and other charges as of time case filed included in secured claim,		
If any: \$ _____ Basis for perfection: _____		
Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)		
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.		
If the documents are not available, please explain:		
Date: 08/02/2010	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.	
<i>/s/ Terry P Dorshaw, Chapter 7 Trustee, PO Box 556, Warminster, PA 18974-0632 215.322.8800</i>		FOR COURT USE ONLY

Penalty for presenting fraudulent claim. Fine of up to \$500,000 or imprisonment for up to 5 years, or both - 11 U.S.C. §§ 132 and 3571

New Balance
\$0.00Minimum Payment Due
\$1,015.00

Enter Amount Due and Enter Below

Payment Due Date
October 29, 2006

\$ []

23 SDSN6491 C016330
CONWAY, JAMES
3418 HARTVILLE ST
PHILADELPHIA PA 19134-1113Text APP to DISCOV* to receive a link to our
free mobile app and pay your bill in seconds
from anywhere!Address, e-mail or telephone change? Print change in space
above, or go to Discover.com. Print your email address to
receive important Account information and special offers.PO BOX 6103
CAROL STREAM IL 60197-6103

00000198645866136936900000000000000000101500

Discover Platinum Card Account Summary

Account number ending in	2244	Closing Date: September 29, 2006	page 1 of 1
Payment Due Date	October 29, 2006	Previous Balance	\$ 6,035.78
Minimum Payment Due	\$1,015.00	Payments And Credits	6,035.78
Credit Limit	\$5,000.00	Purchases	0.00
Credit Available	\$0.00	Cash Advances	0.00
Cash Credit Limit	\$1,500.00	Balance Transfer	0.00
Cash Credit Available	\$0.00	Finance Charges	0.00
		New Balance	\$ 0.00

Cashback Bonus*	Opening Cashback Bonus Balance	\$	0.00
Cashback Bonus Anniversary Month: March	New Cashback Bonus This Period	\$	0.00

How Can We Help You?

It's your choice - 3 ways to help

Please have your Discover Card available.

For TDD (assistance for hearing impaired) see reverse side

1. Visit Discover.com to pay your bill for no cost, view your latest Account information, earn and redeem rewards and more.
2. Call 1-800-DISCOVER (347-2683) for fast, easy self-service options or to speak with a Customer Service Account Manager.
3. Write us at Discover Card, P.O. Box 30943, Salt Lake City, UT 84130.

Transactions

\$0 Fraud Liability Guarantee Use your Discover Card with confidence.

Trans. Date	Post Date	Amount
Sep 30	Sep 30	INTERNAL CHARGE-OFF

\$ -6,035.78

Finance Charge Summary

Average Daily Balance	Daily Purchase Rate	Nominal ANNUAL PERCENTAGE RATES	Annual Percentage Rates	Periodic FINANCE CHARGES	Transaction FINANCE CHARGES
Current Billing Period: 14 days					
Purchases	\$0	0.06162%	22.49% Y	\$0	\$0
Cash Advances	\$0	0.05751%	20.92% F	\$0	\$0

The rates that apply to your Account are either fixed (F) or they may vary (Y) as noted above.

In Re:) Case No. 08-13403
James Conway)
Debtor(s)) Chapter 7

AFFIDAVIT OF CREDITOR
REGARDING OWNERSHIP OF ACCOUNT(S)

State of Ohio)
County of Franklin)

I, Richard Springer, am the Bankruptcy Department Manager for UB Servicing Corporation, a servicing affiliate of Discover Bank, after being first duly sworn upon oath, states as follows:

1. Discover Bank did not file a proof of claim in the matter because we did not receive a notice of assets in the case.
2. As a result, the trustee in the case filed a proof of claim in the name of Discover Financial Services instead of Discover Bank.
3. That Discover Bank, f/k/a Greenwood Trust Company, and is a FDIC-insured Delaware State bank, and its service affiliate DB Servicing Corporation, extends credit through issuance of the Discover Card. As the servicing affiliate, DB Servicing Corporation performs a variety of Services for Discover Bank including, among other things, marketing, application approval, transaction approval, customer service, security, billing and the collection of delinquent accounts. Both DB Servicing Corporation and Discover Bank are both wholly owned subsidiaries of Discover Financial Services.
4. My name, address and telephone number are as follows:

Richard Springer
Department Manager
DB Servicing Corporation
PO Box 3025
New Albany, OH 43054-3025
(614) 283-1090

I hereby certify that the foregoing statements are true and correct to the best of my knowledge and belief.

03/01/10
Date

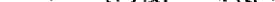
Richard Springer
DB Servicing Corporation
PO Box 3025
New Albany, OH 43054-3025

ACKNOWLEDGMENT

STATE OF *Ohio*)

COUNTY OF *Franklin*

Before me a Notary Public, in and for said County and State on this 29th day of March, 2012, personally appeared Richard Spangler, known to me to be the identical person who subscribed his/her name to the foregoing instrument as its Richard Spangler, and acknowledged to me that he/she executed the same as his/her free and voluntary act and deed of such corporation, for the purposes therein set forth.

In Witness Whereof, I have hereunto set my official signature and affixed my official  seal this 1st day of January, in the year first
above written.

My Commission Expires:

117/10-15

and deed of such corporation, for the purposes therein set forth.
My official signature and affixed my official seal this 2nd day of year first

LORI DEELY
Notary Public
In and for the State of Ohio
My Commission Expires
Nov. 18, 2015